

**DECLARATION FOR
UTILITY OR DESIGN
PATENT APPLICATION**☒

Declaration Submitted with Initial Filing

☐

Declaration Submitted after Initial Filing

Attorney Docket Number**X-15460****First Named Inventor****Scott Eugene Conner****COMPLETE IF KNOWN****Application Number****Filing Date****Group Art Unit****Examiner Name**

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

FUSED HETEROCYCLIC DERIVATIVES AS PPAR MODULATORS

the specification of which

☐ is attached hereto

OR

☒was filed on
(MM/DD/YYYY)

12/31/2003

as United States Application Number or PCT International

Application
Number

PCT/US03/39120

and was amended on
(MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations, § 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code § 119(a)-(d) or § 365(b) of any foreign application(s) for patent or inventor's certificate, or § 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐

Additional foreign application numbers are listed on a supplemental priority sheet attached hereto:

I hereby claim the benefit under Title 35, United States Code § 119(e) of any United States provisional applications(s) listed below.

Application Number(s)**Filing Date (MM/DD/YYYY)**

60/438,540

01/06/2003

60/438,541

01/06/2003

☐Additional provisional application
numbers are listed on a supplemental
priority sheet attached hereto.

**DECLARATION**

I hereby claim the benefit under Title 35, United States Code §120 of any United States application(s), or § 385(c) of any PCT International application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of Title 35, United States Code § 112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations § 1.56 which became available between the filing date of the prior application and the national or PCT International filing date of this application.

U.S. Parent Application Number	PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority sheet attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

Attorney Name	Reg. No.
Arvie J. Anderson	45,263
Lynn D. Apelgren	45,341
Robert A. Armitage	27,417
Brian P. Barrett	39,597
Michael T. Bates	34,121
Roger S. Benjamin	27,025
Gary M. Birch	48,881
William R. Boudreaux	35,796
Steven P. Caltrider	36,467
Paul R. Cantrell	36,470
John Cleveland	50,697
Charles E. Cohen	34,565
Donald L. Corneglio	30,741
Gregory A. Cox	47,504
Paula K. Davis	47,517
John C. Demeter	30,167
Manisha A. Desai	43,585
Paul J. Gaylo	36,808
Caren D. Geppert	54,117
Francis O. Ginah	44,712
Amy E. Hamilton	33,894
Danica Hostettler	51,920
Thomas E. Jackson	33,084
Soonhee Jang	44,802
Gerald P. Keleher	43,707
James J. Kelley	41,888
Paul J. Koivuniemi	31,533

Attorney Name	Reg. No.
Thomas LaGrandeur	51,026
Robert E. Lee	27,919
James P. Leeds	35,241
Nelsen L. Lentz	38,537
Elizabeth A. McGraw	44,646
Douglas K. Norman	33,267
Arleen Palmberg	40,422
Thomas G. Plant	35,784
Edward Prehn	37,212
Grant E. Reed	41,284
James J. Sales	33,773
Michael J. Sayles	32,295
David M. Stemerick	40,187
Mark J. Stewart	43,936
Robert D. Tiltus	40,206
Robert C. Tucker	45,165
Tina M. Tucker	47,145
MaCharri Vorndran-Jones	36,711
Gilbert T. Voy	43,972
Thomas D. Webster	39,872
Lawrence T. Welch	29,487
Alexander Wilson	45,782
Mark A. Winter	53,782
MaryAnn Wiskerchen	45,511
Dan L. Wood	48,613

☐ Additional registered practitioner(s) named on a supplemental sheet attached hereto.

Direct all correspondence to:

Name	ELI LILLY AND COMPANY				
Address	ATTN: MaCharri Vorndran-Jones				
Address	Patent Division, P.O. Box 6288				
City	INDIANAPOLIS	State	INDIANA	ZIP	46206-6288
Country	US	Telephone	(317) 276-1665	Fax	(317) 276-3861

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:		<input type="checkbox"/> A Petition has been filed for this unsigned inventor					
Given Name	Scott	Middle Name	Eugene	Family Name	Conner	Suffix e.g. Jr.	
Inventor's Signature					Date	7-5-04	
Residence: City	Indianapolis	State	IN	Country	US	Citizenship	US
Address	8426 Carefree Circle						
Post Office Address	SAME AS ABOVE						
City	Indianapolis	State	IN	Zip	46236	Country	US

☒ Additional Inventors are being named on supplement sheet(s) attached hereto.

Please type a plus sign (+) inside this box



PTO/SB/01 (8-96) (MODIFIED)

Approved for use through 9/30/98. OMB 0651-0032
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

DECLARATION

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A Petition has been filed for this unsigned inventor			
Given Name	Nathan	Middle Name	Bryan	Family Name	Mantlo	Suffix e.g. Jr.	
Inventor's Signature	<i>Nathan Bryan Mantlo</i>					Date	2-4-2004
Residence: City	Brownsburg	State	IN	Country	US	Citizenship	US
Address	7325 East County road 800 North						
Post Office Address	SAME AS ABOVE						
City	Brownsburg	State	IN	Zip	46112	Country	US

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A Petition has been filed for this unsigned inventor			
Given Name	Guoxin	Middle Name		Family Name	Zhu	Suffix e.g. Jr.	
Inventor's Signature	<i>Guoxin Zhu</i>					Date	2-5-04
Residence: City	Noblesville	State	IN	Country	US	Citizenship	CN
Address	9972 Parkshore Drive						
Post Office Address	SAME AS ABOVE						
City	Noblesville	State	IN	Zip	46060	Country	US

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

I hereby appoint:

☒ Practitioners associated with the Customer Number.

25885

OR

☐ Practitioner(s) named below (if more than ten patent practitioners are to be named, then a customer number must be used):

Name	Registration Number

as attorney(s) or agent(s) to represent the undersigned before the United States Patent and Trademark Office (USPTO) in connection with any and all patent applications assigned only to the undersigned according to the USPTO assignment records or assignment documents attached to this form in accordance with 37 CFR 3.73(b).

as attorney(s) or agent(s) to represent the undersigned before the United States Patent and Trademark Office (USPTO) in connection with any and all patent applications assigned only to the undersigned according to the USPTO assignment records or assignment documents attached to this form in accordance with 37 CFR 3.73(b).

**Eli Lilly and Company
Patent Division
PO Box 6288
Indianapolis, Indiana 46206-6288**

A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be filed in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed.

The individual whose signature and title is supplied below is authorized to act on behalf of the assignee

Name	Douglas K. Norman		
Signature	<i>Douglas K. Norman</i>	Date	10 August 2004
Title	Deputy General Counsel, General Patent Counsel	Telephone	317-433-1651

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.